

FEE TRANSMITTAL

Electronic Version v08

Stylesheet Version v08.0

| Title of Invention | VEHICLE TORQUE RESOLUTION | | | | | | | | | | | | | | | | | | | | | | |
|---|-------------------------------|-----------|-------------|--|-------------|-----------|-------------|--------------------|-------------------|-----|------|--|-----|------------------------|---|------|----|---|--|--|--|--|--|
| Application Number : Date : First Named Applicant: Anthony Mark Phillips Attorney Docket Number: 81045169/201-1566 | | | | | | | | | | | | | | | | | | | | | | | |
| TOTAL FEE AUTHORIZED \$ 1164 Patent fees are subject to annual revisions on or about October 1st of each year. | | | | | | | | | | | | | | | | | | | | | | | |
| Filing as large entity | | | | | | | | | | | | | | | | | | | | | | | |
| BASIC FILING FEE | | | | | | | | | | | | | | | | | | | | | | | |
| <table border="1"><tr><th>Fee Description</th><th>Fee Code</th><th>Amount \$</th><th>Fee Paid \$</th></tr><tr><td>Utility Filing Fee</td><td>1001</td><td>750</td><td>750</td></tr><tr><td colspan="4">Subtotal For Basic Filing Fees: \$ 750</td></tr></table> | | | | Fee Description | Fee Code | Amount \$ | Fee Paid \$ | Utility Filing Fee | 1001 | 750 | 750 | Subtotal For Basic Filing Fees: \$ 750 | | | | | | | | | | | |
| Fee Description | Fee Code | Amount \$ | Fee Paid \$ | | | | | | | | | | | | | | | | | | | | |
| Utility Filing Fee | 1001 | 750 | 750 | | | | | | | | | | | | | | | | | | | | |
| Subtotal For Basic Filing Fees: \$ 750 | | | | | | | | | | | | | | | | | | | | | | | |
| EXTRA CLAIM FEES | | | | | | | | | | | | | | | | | | | | | | | |
| <table border="1"><tr><th>Fee Description</th><th>Extra Claim</th><th>Fee Code</th><th>Amount \$</th><th>Fee Paid \$</th></tr><tr><td>Total Claims : 43</td><td>23</td><td>1202</td><td>18</td><td>414</td></tr><tr><td>Independent Claims : 3</td><td>0</td><td>1201</td><td>84</td><td>0</td></tr><tr><td colspan="4"></td><td>Subtotal For Extra Claims Fees: \$ 414</td></tr></table> | | | | Fee Description | Extra Claim | Fee Code | Amount \$ | Fee Paid \$ | Total Claims : 43 | 23 | 1202 | 18 | 414 | Independent Claims : 3 | 0 | 1201 | 84 | 0 | | | | | Subtotal For Extra Claims Fees: \$ 414 |
| Fee Description | Extra Claim | Fee Code | Amount \$ | Fee Paid \$ | | | | | | | | | | | | | | | | | | | |
| Total Claims : 43 | 23 | 1202 | 18 | 414 | | | | | | | | | | | | | | | | | | | |
| Independent Claims : 3 | 0 | 1201 | 84 | 0 | | | | | | | | | | | | | | | | | | | |
| | | | | Subtotal For Extra Claims Fees: \$ 414 | | | | | | | | | | | | | | | | | | | |
| AUTHORIZED BILLING INFORMATION | | | | | | | | | | | | | | | | | | | | | | | |
| The commissioner is hereby authorized to charge indicated fees and credit any overpayments to: | | | | | | | | | | | | | | | | | | | | | | | |
| Deposit account number: | 061510 | | | | | | | | | | | | | | | | | | | | | | |
| Deposit name: | Ford Global Technologies, LLC | | | | | | | | | | | | | | | | | | | | | | |
| Deposit authorized name: | Frank A. Angileri | | | | | | | | | | | | | | | | | | | | | | |
| Signature: | /s/Frank A. Angileri | | | | | | | | | | | | | | | | | | | | | | |
| Date (YYYYMMDD): | 2003-09-11 | | | | | | | | | | | | | | | | | | | | | | |
| Charge Assignment Fees Required Under 37 C.F.R. Section 1.21 (h). | | | | | | | | | | | | | | | | | | | | | | | |
| Charge Any Additional Fee Required Under 37 C.F.R. Sections 1.16 and 1.17. | | | | | | | | | | | | | | | | | | | | | | | |